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APPLICANTS

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** CONTINUING DATA *None* *****

** FOREIGN APPLICATIONS *Yes* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 9	TOTAL CLAIMS <i>62</i>	INDEPENDENT CLAIMS <i>3</i>
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Verified and Acknowledged
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TITLE
 POWER NODE CONTROL CENTER

FILING FEE RECEIVED 2558	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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